PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09735586

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			25					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	ОЯ	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		٠	5		X\$ 9=	45	OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		•	/		X40=	40	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL	440	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E		OR	OTHER SMALL		
AMENDMENT A	16	CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	. Total	· 191	Minus	%	7	= /		X\$ 9=		OR	X\$18=		
	Independent	• 4	Minus	··· }	7 (2) 4114	<u> </u>		X40=		OR	X80=		
	FIRST PHESE	NTATION OF MI	JLIIPLE DEP	ENDEN	CLAIM		ן נ	+135=		OR	+270=	·	
							l	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI PAID	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- PIÓNAL FEE	
	Total	. 19	Minus	1º	<u> </u>	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	••• Ì		= -	┨┃	X40=		OR	X80=		
<u> </u>	FIRST PRESE	NIAHON OF M	JUITPLE DEP	ENDEN	CLAIM	<u></u>	_	+135=		OR	+270=		
							ļ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)			mn 2)	(Column 3		AUUII. FEE I			ADDII. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	*** 54054	T (1) 4 114	-	4	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
**	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												